


|   |  |   |
|---|--|---|
| <b>Issue Classification</b><br> | <b>Application/Control No.</b><br>10535323 | <b>Applicant(s)/Patent Under Reexamination</b><br>PETROU ET AL. |
|   | <b>Examiner</b><br>Seyed Azarian           | <b>Art Unit</b><br>2624   |

| ORIGINAL                  |  |          |  |  |  | INTERNATIONAL CLASSIFICATION |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|---------------------------|--|----------|--|--|--|------------------------------|---|---|---|---------------------|-------------|--|--|--|---|---|---|---|---------------------|--|
| CLASS                     |  | SUBCLASS |  |  |  | CLAIMED                      |   |   |   |                     | NON-CLAIMED |  |  |  |   |   |   |   |                     |  |
| 382                       |  | 128      |  |  |  | G                            | 0 | 6 | K | 9 / 00 (2006.01.01) |             |  |  |  | C | 1 | 2 | Q | 3 / 00 (2006.01.01) |  |
| <b>CROSS REFERENCE(S)</b> |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
| <b>CLASS</b>              | <b>SUBCLASS (ONE SUBCLASS PER BLOCK)</b> |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
| 382                       | 188                                      |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
| 435                       | 6  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |
|                           |  |          |  |  |  |                              |   |   |   |                     |             |  |  |  |   |   |   |   |                     |  |

| <input type="checkbox"/> <b>Claims renumbered in the same order as presented by applicant</b> <input type="checkbox"/> <b>CPA</b> <input type="checkbox"/> <b>T.D.</b> <input type="checkbox"/> <b>R.1.47</b> |          |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
|---|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final   | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| 1   | 1        | 15    | 17       |       |          |       |          |       |          |       |          |       |          |       |          |
| 2   | 2        | 16    | 18       |       |          |       |          |       |          |       |          |       |          |       |          |
| 3   | 3        | 19    | 19       |       |          |       |          |       |          |       |          |       |          |       |          |
| 6   | 4        | 20    | 20       |       |          |       |          |       |          |       |          |       |          |       |          |
| 7   | 5        | 21    | 21       |       |          |       |          |       |          |       |          |       |          |       |          |
| 4   | 6        | 22    | 22       |       |          |       |          |       |          |       |          |       |          |       |          |
| 5   | 7        | 23    | 23       |       |          |       |          |       |          |       |          |       |          |       |          |
| 8   | 8        | 27    | 24       |       |          |       |          |       |          |       |          |       |          |       |          |
| 9   | 9        | 28    | 25       |       |          |       |          |       |          |       |          |       |          |       |          |
| 10  | 10       | 24    | 28       |       |          |       |          |       |          |       |          |       |          |       |          |
| 11  | 11       | 25    | 27       |       |          |       |          |       |          |       |          |       |          |       |          |
| 12  | 12       | 29    | 28       |       |          |       |          |       |          |       |          |       |          |       |          |
| 13  | 13       | 28    | 29       |       |          |       |          |       |          |       |          |       |          |       |          |
| 14  | 14       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 17  | 15       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |
| 18  | 16       |       |          |       |          |       |          |       |          |       |          |       |          |       |          |

|   |  |                                    |                        |
|---|--|------------------------------------|------------------------|
| NONE  |  | <b>Total Claims Allowed:</b><br>29 |                        |
| (Assistant Examiner)<br>/Seyed Azarian/<br>Primary Examiner.Art Unit 2624 |  | (Date)<br>06/22/2009               |                        |
| (Primary Examiner)  |  | (Date)<br>06/22/2009               |                        |
|   |  | O.G. Print Claim(s)<br>1           | O.G. Print Figure<br>2 |